00772

# IREDELL COUNTY HEALTH DEPARTMENT

## (SEPTIC TANK) IMPROVEMENTS PERMIT AND CERTIFICATE OF COMPLETION

(Ground Absorption Sewage Disposal System -- G. S. Chapter 130-Article 13C)

OWNER OR CONTRACTOR Liberty Homes Inc. DATE 6-13-84 PERMIT NO. _____

PHONE: Business _____ Home _____

LOCATION 70E 6mi TR on morehead at end

SUBDIVISION NAME _____ S. R. No. _____

LOT NO. _____ SECTION OR BLOCK NO. _____

House ( ) Mobile Home ( ) Business ( ) Other Manufactering 94 Employees

No. Bedrooms _____ No. Bathrooms _____

| | | |
|---|---|---|
| Garbage Disposal Unit | Yes ( ) | No ( ) |
| Auto. Dishwasher | Yes ( ) | No ( ) |
| Auto. Wash. Machine | Yes ( ) | No ( ) |
| Site Suitable | Yes ( ) | No ( ) |

Lot Area acerage

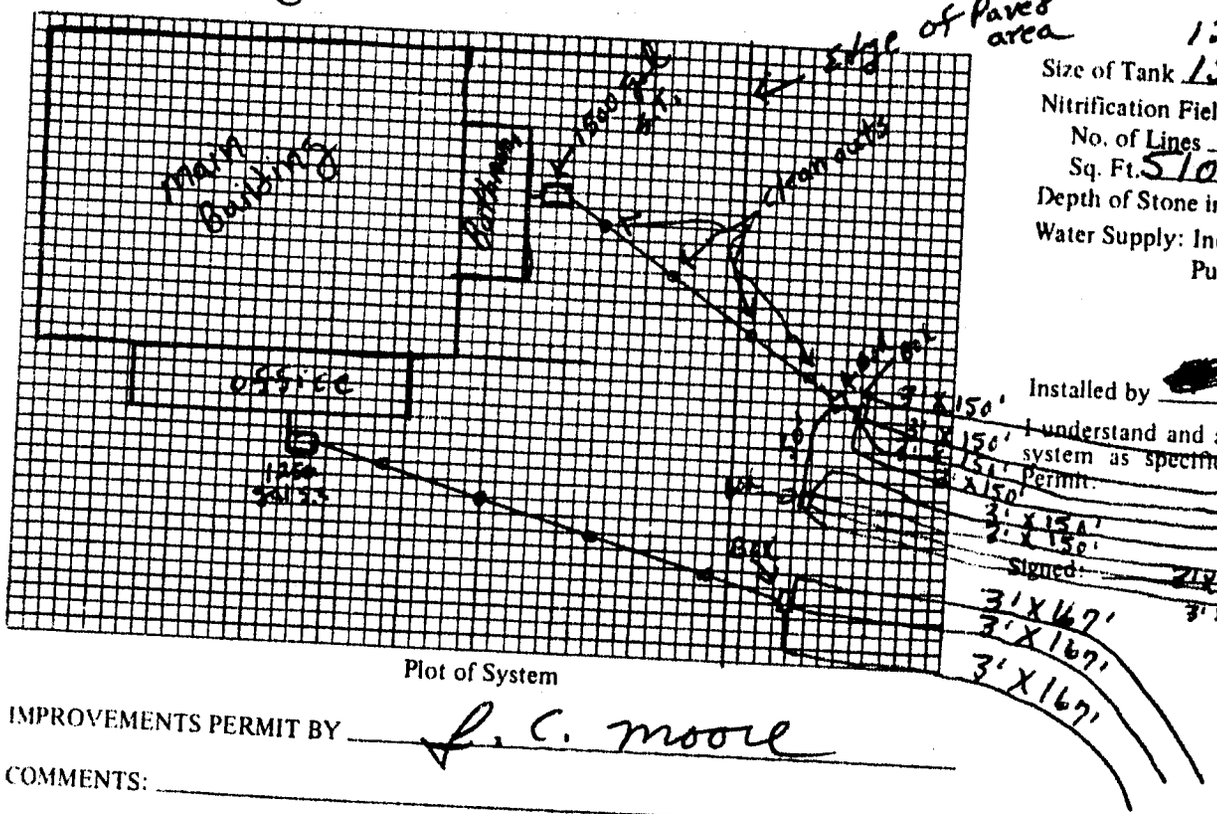
Character & Porosity of Soil Clay

Percolation Rate .4 gal/sq' Hard

Topography 2 to 6%

Depth to Water Table 10'+

Rock or other impervious formations none




Plot of System

1250 office

Size of Tank 1500 Plant Gals.

Nitrification Field:

No. of Lines 11

Sq. Ft. 5100 Linear Ft. 1700

Depth of Stone in Lines 12"

Water Supply: Individual ( )

Public (✓)

Installed by Sigmon Septic Service

I understand and agree to install septic tank system as specified on this Improvements Permit.

Signed: _____

IMPROVEMENTS PERMIT BY L. C. Moore

COMMENTS: _____

CERTIFICATE OF COMPLETION BY L. C. Moore

EXISTING SYSTEM CHECKED BY: _____ DATE _____

CONSTRUCTION MUST COMPLY WITH ALL OTHER APPLICABLE STATE AND LOCAL REGULATIONS.

DATE _____

Permit is VOID if any unauthorized changes are made in installation of system and/or if any false information is supplied in making Improvements Permit.

Health Dept. Copy: White Inspection Dept. Copy: Yellow Sanitarian's Copy: Pink Owner's Copy: Gold